



INTIMATE CARE POLICY

All children and young people taking part in Forest Pulse activities have the right to be safe and treated with dignity and respect. These guidelines are designed to safeguard both children and young people, and staff/volunteers, and apply to any other person involved with the intimate care of children/vulnerable adults. They aim to support good practice in intimate care.

It is the policy of Forest Pulse that the intimate care of children and vulnerable adults in our care should primarily be the responsibility of staff members. However, it is acceptable for an appropriate volunteer to undertake this care with the prior agreement of a senior staff member, and providing they have the relevant experience and competence.

Individuals with disabilities can be very vulnerable. Any person involved with their intimate care needs to be sensitive to their needs and also aware that some care tasks or treatments could be open to possible misinterpretation. Allegations of sexual abuse are rare, but certain basic guidelines will safeguard both vulnerable individuals and staff/volunteers. Everyone is safer if expectations are clear and approaches are consistent as far as possible. If you cannot work within these guidelines for any reason, please discuss with the Activity Manager and/or the Charity Manager.

1. Treat every child/young person with dignity and respect and ensure privacy.

Privacy is an important issue. Having people undertake this task alone does increase the opportunity for abuse, so whenever possible and appropriate two people should be present. However, this is balanced by the loss of privacy if two people are present – quite apart from the practical difficulties. When it is necessary for staff to carry out this task alone they should ensure that another staff member/responsible volunteer is aware that they are undertaking personal care and available for support if required. The aim will be that the same staff member/volunteer does not always provide the personal care, but giving consideration to the wishes/needs of the individual.

2. Involve the child as far as possible in their own intimate care.

Try to avoid doing things for any individual that they can do for themselves, and if they are able to help ensure they are given the chance to do so. Support them in doing all that they can for themselves. If an individual is fully dependent on you, talk with them about what you are doing and give them choices where possible.

3. Be responsive to a child's reactions.

Check your practice by asking "Is it OK to do it this way?"; this is particularly important when working with someone you have not previously cared for. Whenever possible allow the individual to choose who carries out their personal care. If a young person expresses dislike of a certain person carrying out the intimate care, steps will be taken to find the reason for this. If an individual does not seem happy for you to carry out personal care for some reason, tell members of staff about this.

4. Make sure practice in intimate care is as consistent as possible.

Things do not have to be done in an identical fashion, but it is important that approaches are not markedly different from an individual's usual care. Referral to be made to relevant information provided by parents/carers.

5. Never do something unless you know how to do it.

If you are not sure how to do something ASK, and do not be afraid to ask again until you are confident. Staff will ask parents if there is required information which is not available. No member of staff should undertake any additional or special intimate care procedures without express approval from the Activity Leader or Charity/Development Manager. In such cases guidelines should be agreed, and medical approval, instruction and training secured where needed. . Certain intimate care or treatment procedures may only be carried out by nursing or medical staff – always check with the Activity Leader, Charity/Development Manager if you are not sure about any procedure.

6. If you are concerned, report it.

If during the intimate care of a child or vulnerable adult you notice any of the following please report this to a senior staff member, and complete an incident report. If there is felt to be any cause for concern further action may be necessary:-

- Unusual soreness or tenderness in the genital area.
- Apparent sexual arousal as a result of your actions.
- Emotional reactions without obvious cause.
- The individual seems to misunderstand or misinterpret what you are doing.
- You accidentally hurt them.

7. Encourage the child to have a positive image of their own body.

Confident, assertive children/vulnerable adults who feel their body belongs to them are less vulnerable to sexual abuse. As well as basic practice, such as privacy, the approach you take to a child's intimate care can convey lots of messages to them about what their body is "worth". Your attitude to intimate care is important. Keeping in mind the young person's age, routine care should be enjoyable, relaxed and fun. Do respect any individual's right to say "No".

8. Record any person care which is undertaken.

All personal care should be recorded on the individual's personal care form. This:

1. Provides a record of all toileting undertaken for an individual at a Forest Pulse session.
2. Keeps a record of who undertook the care and at what time
3. Records any other information that needs to be noted, e.g. soreness, unusual behaviour, safeguarding

GUIDELINES FOR WORKING WITH INDIVIDUAL'S OF THE OPPOSITE SEX

Underlying Principles:

1. There is positive value in both male and female staff and volunteers being involved with children/ Vulnerable adults on Forest Pulse activities.
2. Ideally, every individual will be offered the choice of a carer of the same sex for their intimate care.
3. The individual's safety, dignity, privacy and right to exercise choice are of paramount importance.

Intimate Care

1. Give choice whenever possible
2. Where possible boys/young men should be offered a male member of staff/volunteer, and girls/young women a female member of staff/volunteer.
3. If no same sex staff member is available a member of the opposite sex will carry out intimate care.
4. If there is any doubt about any aspect of intimate care, parents /carers will be consulted.
5. The aim will be to avoid the same person always providing the intimate care for an individual.

Reviewed and Approved by Trustees 11th April 2018

Signed on Behalf of the Charity Name/Role